

Thomas Pinkston
(Plaintiff's name) 3:17-cv-665 DCB-LRA

VS
Defendant(s) Kasai-Mr Peter-Ms Harris

Comes Now, plaintiff Thomas, pro se,
and for cause of action against the defendant,
~~Kasai~~ Kasai, Mr Peter, Ms Harris, would state;

Jurisdiction

I was accused of not reaching out to
my supervisor I was leaving work due to
my moms Lupus illness. On that following
Monday I was told to report to HR do to
issue. On 7-17-17 I was ask to leave work
until further notice. till this day 8-7-17 I
haven't been ask to come back to work from
Ms. Harris the HR manager. I've have
live proof of company breaking there owe
contract policy alot with me thanks
for your concern.

Plaintiff is an adult resident citizen
of County of Hinds, State of Mississippi.
The defendant Thomas is an adult
resident citizen of County of Hinds
State of Jackson. The plaintiff will need
to provide this information for each
of Thomas. Doing the company shutdown

we wasn't paid for the two weeks unless we had either vacation or pto time. I didn't have many due to my house fire trying to get my family back home. I used most of the time I had because I used to work ~~and~~ on my house a lot plus work 12 hours on day till my boss cut my time. So I used to be so tired and working so hard to make sure my family and kids ok. I been so honest to the Company and have awards for my work ~~that~~ I've been lied to and lied on for being productive hardworking guy ~~that~~ that honestly been done wrong by the company manager management.

Relief Thomas P. Pitt
 pain and suffering/stress 7506 Jina Street
 back wages and overtime Jackson MS 39204
 Discrimination of work place/showing favoritism
 can prove it by camera at work place
 and time clock

Nissan Supplier Co. Kasai North America INC
 435 Church RD
 Madison MS 39110
 601-407-6600

Attention

Thomas Pinkston

On the day Mr. Harris called me due to her ~~des~~ why he just my vacation hour on the 10, of July I failed to contact Mr. Peter on that day. Yet and still he approved it without me knowing, but fail to put to my PTO hours in for July 14th to say I didn't contact him when I did and he always use my PTO hours if I had them. I had five hours left which would've left me .25 vacation and 1.25 PTO who he planned to get me fire and they know I'm in a very hardship matter. My family kids have another child less than two weeks. My mom's illness slowly killing her today I can even buy a simple meal for her now. One this note on my honest truly facts I really want the jury or judge to decide, on this matter truthfully.

~~Thomas Pinkston~~

RECEIVE

JUL 31 2017

U.S. EEOC/J

For vacation 6

RECEIVED

JUL 31 2017

page 1
U.S. EEOC/JAO

To whom it may concern, my name is Thomas Pinkston and I where award for MET production. I was sent home due to my boss Peter second shift supervisor, by HR due to decision, she still haven't said that I was completely fired from my job title and I feel she miss handle my situation. But I can prove my boss falsely reported I didn't let him know my mom was very sick Friday 14 day of July. I also have vacation hours and Pto hours to cover my time like always he do and the system cell prove that. I can also prove I didn't get in contact with him Monday but he approve me for vacation without me knowing but I thought we always had that understanding because he always approve my vacation or pto. But Monday on the 17 of July I was

page 2

called to the office for not reporting I'm going to check on my dying and sick mother she also told me she tried contact him that Monday before he took me to the office. On our four o'clock break that evening an co-worker came to before I was sent to the office that Peter were trying to file me long before. He offer the guy name NO everybody know him by my job and the guy name Old School who all so work for Peter him NO job which who I trained to be a good material handler. I've witness Peter clocking people in that work under him when late he will tell them to don't clock in he will do it and they will be 10, 15, 20, or more late company policy like a contract you can't break it a point system I know. I've witness him telling

page 3

~~some~~ workers don't clock in
some days he will do the time.
I've witness a lot of time stealing
from him and a lot of employee.
I feel low how he done me
everybody been asking me
do I work there what happen
and I don't ever know. People
love me at my job and
I love them and he knew that.
He also knew I was ready
to change shift because he
knew I figured his favoritism
out. I put my name on the
list for the shutdown for
~~the~~ both week and only
worked 23 one week and 13
the other cause he say they
didn't have everything to do at
the plant. But people telling
me they worked 40 hours or
better I have three kids
and a man that's very very
ill and HR and Peter know.
I've complaint to HR July 12
with a letter stating my

page 4

Ight due and my taxes on my house past due and me and my family will be out on the street after Aug. 31, 2017 and I have proof out everything I'm saying and I request for more time to work in the letter I wrote her. Now I job less aint nobody tell me I'm fired or run I know so much that going on with Peter and other supervisor, employees that's costing the company big time. Everything can be prove by phone, Kasai camera, and time clock of alot of time stealing that can be easily proof my innocent of being treated unfair and can be proved yust by breaking alot of company policy with me and the company. I've consult with my references and they say these are big investorgatic I've tried telling HR be all these broken policy he done and they shut me out so

page 5

For this supervisor. I've receive a Certificate of achievement for L42L Doer trim, Genba Kanti, 5S, and 4 Procedures from six Ranking managers, including the plant manager thats when I start seeing the change in Mr. Peter Meech. I had work all day that day until another Supervisor go by the name Faye told me Thomas did your Supervisor tell you I had a cupcake and award for I been looking for you. I told him nope he didn't but I didn't see nothing wrong with this picture back then even tho I feel some then cause I did see my Supervisor all day, and he aint told me nothing. 2. I was wrote pull up about three months ago stating someone seen me hit a rail and didnt report it and I was facing losing my job turned out they say it wasnt nothing. ~~From~~ Later that night two Supervisor came at me one goes by the name Faith, walked up to me and was like Thomas they ask me bout you hitting the rail. He stated all he said was no he didn't and say nothing but good bout me. The second person

page 6

was a guy name Mark he was a teamleader on the doorline I worked. Stated nothing but good bout me ~~me~~ but also stated Mr. Peter Meech was trying to get me fired how he talked til this day I still dont know who told on me. The day I was wrote up can prove these ~~at~~ asking, even the cameras can show everything that happen.

Days posted they had hired bout four new Forklift Driver who worked the L42 Doorline, didnt get trained before get license. These people recieve there in a week and it took me almost a month in a half to get mines. Thats was another policy I feel he broke as well. Ive witness and report most of them having alot of accidents and nothing was talking place bent elimos every rail the doorline and nothing was taking place. Thats company policy dont report accident of if you see one and dont report your can be wrote up or fired.

page 7

this lead me to do whats right
by letting you know what to
expect before I move for to
my opinion I know that can
proved 100%. Thanks

My contact for more
info that can be
proved about compan
policy that were
broken repeatedly

My number 601-983-8621
My Mom - 601-946-2632

For question #7

page 1

Our return shutdown date was to report back to work on that day. I told HR Ms. Harris why he put my vacation time in for July 10 when I did contact him on that day because I already felt betrayed by him how he did me the week before I only worked 13 hours I can't feed my kids with that. ~~But I came~~ So that day I didn't contact him ~~per~~ period and he still approved my vacation like he always do. So I wrote HR stating I'm facing my lights and my taxes due on ~~the~~ Aug 31 2017 or me and my family will be on the street. Come Friday the 14 2017 about 5:30 some I contact him stating my mom track line for her lupus wanting stop bleeding so I had to go to her house to help her and I had to go at 6:30 I knew I had pto time left which was 5.25 hour that I could use because I know our company have a point system and I always used my time wisely our payroll system can prove this early.

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Come Monday July 17 2017 when I come in to work not knowing he had already plans on getting me fired. After our two o'clock meeting I walked to him stating my mom in the doctor and my 13 year old sister not old enough to stay with my mom at night and its alot on me. After we talk one of our folklift ~~operator~~ drivers goes by the name Frank Greer walked up 15 20 mins after the meeting. Stating Mr. Peter after coming in late clock him in for him and I know he did, because Peter know if we clock in at 2:00 or after we are late so to over ride that he clock them in so they wont get points in the system to avoid getting fired for most of his employees I realized he done like that 100 time I reported it and nothing done In the past. In our company policy stating all these been broken easily by me. But back on this say day after I witness this, two hours past

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So Its 4:00 now it break time, me Frank Greer same employer we sitting in the parking lot smoking a cigarette a guy name Old School everybody know hes one of our forklift driver told me our Supervisor Mr. Peter Meech was trying to give a guy name N.O. another forklift driver my job and trying to get me fired but I had already felt something qin right. So come 5:00 I was called to the office stating I fail to report to him Aug 14 2017 when I did I knew then I've been setup. For one I knew I did, second I knew I had enough time to cover my 4 hour but why he didnt use them and he always do and the system payroll can prove it easily. HR ask me twice did I said yes third time I just no because I knew I been setup. She told me to leave and ~~the~~ she told me to leave and they will get back with with me. The last time I talk to HR Ms. Harris was Aug 20 and she still fail to hire me so I believe that wrong

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leading me in the wrong direction when everybody know what I'm facing and this not making no better for me. So I feel like I was wrongful mistreated and looked over when I did nothing but good and loyal to Kasai. I've also got texts in my phone stating the lines been going down alot now since I'm gone be the guy N.O. couldn't do the job. Not only that the HR Ms Harris hired a former employer goes by the name James with he was a team leader I was replaced with doing the same job he was doing but wasn't getting paid what he was getting paid for the same job. Not only that he was fired because he stole an employee work check and cashed it but they do me like this its so much I can prove easily to me policy was broken that like on contract breaking to me and all I been was loyal to my boss and Kasai.

EEOC Form 161 (11/16)

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

DISMISSAL AND NOTICE OF RIGHTS

To: Thomas L. Pinkston
750 Winn Street
Jackson, MS 39204

From: Jackson Area Office
100 West Capitol Street
Suite 338
Jackson, MS 39269

☐

On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

EEOC Representative

Telephone No.

423-2017-02163

Mildred J. Stuckey,
Intake Supervisor

(601) 948-8412

THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:

☐

The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.

☐

Your allegations did not involve a disability as defined by the Americans With Disabilities Act.

☐

The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.

☐

Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge

☒

The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.

☐

The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.

☐

Other (briefly state)

- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit **must be filed WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission



Wilma Scott,
Director

8-4-17

(Date Mailed)

Enclosures(s)

cc:

Loreann Harris
Human Resources Manager
KASAI NORTH AMERICA
435 Church Road
Madison, MS 39110

**INFORMATION RELATED TO FILING SUIT
UNDER THE LAWS ENFORCED BY THE EEOC**

*(This information relates to filing suit in Federal or State court under Federal law.
If you also plan to sue claiming violations of State law, please be aware that time limits and other
provisions of State law may be shorter or more limited than those described below.)*

**PRIVATE SUIT RIGHTS -- Title VII of the Civil Rights Act, the Americans with Disabilities Act (ADA),
the Genetic Information Nondiscrimination Act (GINA), or the Age
Discrimination in Employment Act (ADEA):**

In order to pursue this matter further, you must file a lawsuit against the respondent(s) named in the charge within 90 days of the date you receive this Notice. Therefore, you should **keep a record of this date**. Once this 90-day period is over, your right to sue based on the charge referred to in this Notice will be lost. If you intend to consult an attorney, you should do so promptly. Give your attorney a copy of this Notice, and its envelope, and tell him or her the date you received it. Furthermore, in order to avoid any question that you did not act in a timely manner, it is prudent that your suit be filed within 90 days of the date this Notice was mailed to you (as indicated where the Notice is signed) or the date of the postmark, if later.

Your lawsuit may be filed in U.S. District Court or a State court of competent jurisdiction. (Usually, the appropriate State court is the general civil trial court.) Whether you file in Federal or State court is a matter for you to decide after talking to your attorney. Filing this Notice is not enough. You must file a "complaint" that contains a short statement of the facts of your case which shows that you are entitled to relief. Courts often require that a copy of your charge must be attached to the complaint you file in court. If so, you should remove your birth date from the charge. Some courts will not accept your complaint where the charge includes a date of birth. Your suit may include any matter alleged in the charge or, to the extent permitted by court decisions, matters like or related to the matters alleged in the charge. Generally, suits are brought in the State where the alleged unlawful practice occurred, but in some cases can be brought where relevant employment records are kept, where the employment would have been, or where the respondent has its main office. If you have simple questions, you usually can get answers from the office of the clerk of the court where you are bringing suit, but do not expect that office to write your complaint or make legal strategy decisions for you.

PRIVATE SUIT RIGHTS -- Equal Pay Act (EPA):

EPA suits must be filed in court within 2 years (3 years for willful violations) of the alleged EPA underpayment: back pay due for violations that occurred more than 2 years (3 years) before you file suit may not be collectible. For example, if you were underpaid under the EPA for work performed from 7/1/08 to 12/1/08, you should file suit before 7/1/10 -- not 12/1/10 -- in order to recover unpaid wages due for July 2008. This time limit for filing an EPA suit is separate from the 90-day filing period under Title VII, the ADA, GINA or the ADEA referred to above. Therefore, if you also plan to sue under Title VII, the ADA, GINA or the ADEA, in addition to suing on the EPA claim, suit must be filed within 90 days of this Notice and within the 2- or 3-year EPA back pay recovery period.

ATTORNEY REPRESENTATION -- Title VII, the ADA or GINA:

If you cannot afford or have been unable to obtain a lawyer to represent you, the U.S. District Court having jurisdiction in your case may, in limited circumstances, assist you in obtaining a lawyer. Requests for such assistance must be made to the U.S. District Court in the form and manner it requires (you should be prepared to explain in detail your efforts to retain an attorney). Requests should be made well before the end of the 90-day period mentioned above, because such requests do not relieve you of the requirement to bring suit within 90 days.

ATTORNEY REFERRAL AND EEOC ASSISTANCE -- All Statutes:

You may contact the EEOC representative shown on your Notice if you need help in finding a lawyer or if you have any questions about your legal rights, including advice on which U.S. District Court can hear your case. If you need to inspect or obtain a copy of information in EEOC's file on the charge, please request it promptly in writing and provide your charge number (as shown on your Notice). While EEOC destroys charge files after a certain time, all charge files are kept for at least 6 months after our last action on the case. Therefore, if you file suit and want to review the charge file, **please make your review request within 6 months of this Notice**. (Before filing suit, any request should be made within the next 90 days.)

IF YOU FILE SUIT, PLEASE SEND A COPY OF YOUR COURT COMPLAINT TO THIS OFFICE.

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC </div> <div style="text-align: right;"> 423-2017-02163 </div> </div>	
_____ and EEOC State or local Agency, if any			
Name (indicate Mr., Ms., Mrs.) Mr. Thomas L. Pinkston		Home Phone (incl. Area Code) Date of Birth <div style="display: flex; justify-content: space-between;"> <div> JUL 31 2017 </div> <div> 1986 </div> </div>	
Street Address 750 Winn Street, Jackson, MS 39204		City, State and ZIP Code U.S. EEOC/JAO	
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name KASAI NORTH AMERICA		No. Employees, Members Phone No. (Include Area Code) <div style="display: flex; justify-content: space-between;"> <div> 201 - 500 </div> <div> (601) 407-5000 </div> </div>	
Street Address 435 Church Road, Madison, MS 39110		City, State and ZIP Code	
Name		No. Employees, Members Phone No. (Include Area Code)	
Street Address		City, State and ZIP Code	
DISCRIMINATION BASED ON (Check appropriate box(es).) <div style="display: flex; flex-wrap: wrap; justify-content: space-between;"> <div><input type="checkbox"/> RACE</div> <div><input type="checkbox"/> COLOR</div> <div><input type="checkbox"/> SEX</div> <div><input type="checkbox"/> RELIGION</div> <div><input type="checkbox"/> NATIONAL ORIGIN</div> <div><input checked="" type="checkbox"/> RETALIATION</div> <div><input type="checkbox"/> AGE</div> <div><input type="checkbox"/> DISABILITY</div> <div><input type="checkbox"/> GENETIC INFORMATION</div> <div><input type="checkbox"/> OTHER (Specify)</div> </div>		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest <div style="display: flex; justify-content: space-between;"> <div> 07-17-2017 </div> <div> 07-17-2017 </div> </div> <div style="text-align: center; margin-top: 10px;"> <input type="checkbox"/> CONTINUING ACTION </div>	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): I was hired on July 27, 2016 as a Forklift Operator. On or about July 17, 2017 I was discharged. I was told I was discharged because I did not report to anyone I was leaving work on July 14, 2017. I believe I have been discharged in retaliation in violation of Title VII of the Civil Rights Act of 1964, as amended, in as much as <div style="margin-left: 20px;"> a) on July 14th, I had worked four hours before leaving work due to my mother's illness. I deny leaving without informing a supervisor. I advised Supervisor Peter Meech (Black) of my need to leave; and b) I believe Meech sought to fire me because he knows I witnessed him letting others work their time and overtime. I also witnessed him clocking some workers in when they were not there on time. He treated those employees (including Black males) more favorably than me. He sent me home early every day during the first week stating there was not enough work for me </div>			

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures. I declare under penalty of perjury that the above is true and correct.	NOTARY - When necessary for State and Local Agency Requirements I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;"> 7/26/17 Date </div> <div style="text-align: center;"> Charging Party Signature </div> </div>	



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION
Jackson Area Office

Dr. A. H. McCoy Federal Building
100 W. Capitol Street, Suite 338
Jackson, MS 39269

Intake Information Group: 800-669-4000
Intake Information Group TTY: 800-669-6820
Jackson Status Line: 866-408-8075
Jackson Direct Dial: (601) 948-8466
TTY (601) 948-8469
FAX (601) 948-8401
Website: www.eeoc.gov

Mr. Thomas L. Pinkston
750 Winn Street
Jackson, MS 39204

RE: Charge No. 423-2017-02163
Thomas L. Pinkston v. Kasai North America

Dear Mr. Pinkston:

On July 31, 2017, you filed a charge alleging you were discriminated against in violation of the Title VII of the Civil Rights Act of 1964, as amended, in that you were discharged on July 17, 2017 in retaliation. This letter is provided as notification and explanation as to why the EEOC will not continue its investigation of this matter.

The Respondent's actions regarding your employment do not appear to have been based on protected activity under the statutes we enforce. In order to establish a violation on the basis of retaliation, the evidence must show in the following order of proof: 1) Charging Party has engaged in protected activity under the statute; 2) Respondent was aware of the involvement of Charging Party in protected activity; 3) Respondent acted to deny a right or a privilege or to harm Charging Party; 4) There was a causal connection between Charging Party's activity and Respondent's action; and 5) Respondent cannot provide a nondiscriminatory reason for the action against Charging Party. Although you allegedly were discharged and you believe this was due to your having witnessed your Black supervisor letting others work their time and overtime while you were denied the same; there is no evidence or allegation that your discharge was because you complained or opposed (protested) activity protected under the statute. Furthermore, while you allege retaliation, the Respondent has offered a non-discriminatory reason for its action of discharging you, e.g., "leaving work without permission on July 14, 2017". You stated this was not true, but the supervisor advised otherwise. You stated your Black supervisor treated the other employees (all Black males like yourself) more favorably. Based on this analysis, we have concluded that it is unlikely that additional investigation into this matter would result in a finding that the law was violated as you alleged and, therefore, we are recommending this matter be closed.

If you wish to pursue your charge further, you have the right to sue the Respondent named in U. S. District Court within 90 days from the date you receive the Dismissal and Notice of Rights and Information Sheet. Upon your receipt these documents, please read them carefully. If you have any questions, please call me at (601) 948-8412.

Sincerely,

A handwritten signature in black ink, appearing to be "D. J. S.", is located at the bottom right of the letter.

EEOC FORM 131 (11/09)

U.S. Equal Employment Opportunity Commission

Ms. Loreann Harris
Human Resources Manager
KASAI NORTH AMERICA
435 Church Road
Madison, MS 39110

PERSON FILING CHARGE

Thomas L. Pinkston

THIS PERSON (check one or both)

☐

Claims To Be Aggrieved

☐

Is Filing on Behalf of Other(s)

EEOC CHARGE NO.

423-2017-02163

NOTICE OF CHARGE OF DISCRIMINATION

(See the enclosed for additional information)

This is notice that a charge of employment discrimination has been filed against your organization under:

☒

Title VII of the Civil Rights Act (Title VII)

☐

The Equal Pay Act (EPA)

☐

The Americans with Disabilities Act (ADA)

☐

The Age Discrimination in Employment Act (ADEA)

☐

The Genetic Information Nondiscrimination Act (GINA)

The boxes checked below apply to our handling of this charge:

- ☒ No action is required by you at this time.
- ☐ Please call the EEOC Representative listed below concerning the further handling of this charge.
- ☐ Please provide by a statement of your position on the issues covered by this charge, with copies of any supporting documentation to the EEOC Representative listed below. Your response will be placed in the file and considered as we investigate the charge. A prompt response to this request will make it easier to conclude our investigation.
- ☐ Please respond fully by to the enclosed request for information and send your response to the EEOC Representative listed below. Your response will be placed in the file and considered as we investigate the charge. A prompt response to this request will make it easier to conclude our investigation.
- ☐ EEOC has a Mediation program that gives parties an opportunity to resolve the issues of a charge without extensive investigation or expenditure of resources. If you would like to participate, please say so on the enclosed form and respond by to
If you DO NOT wish to try Mediation, you must respond to any request(s) made above by the date(s) specified there.

For further inquiry on this matter, please use the charge number shown above. Your position statement, your response to our request for information, or any inquiry you may have should be directed to:

Mildred J. Stuckey,
Intake Supervisor

EEOC Representative

Telephone

(601) 948-8412

Jackson Area Office
100 West Capitol Street
Suite 338
Jackson, MS 39269
Fax: (601) 948-8401

Enclosure(s): ☐ Copy of Charge

CIRCUMSTANCES OF ALLEGED DISCRIMINATION

☐

Race

☐

Color

☐

Sex

☐

Religion

☐

National Origin

☐

Age

☐

Disability

☒

Retaliation

☐

Genetic Information

☐

Other

ISSUES: Discharge

DATE(S) (on or about): EARLIEST: 07-17-2017 LATEST: 07-17-2017

Date

August 1, 2017

Name / Title of Authorized Official

Wilma Scott,
Director

Signature

368 jch

EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC </div> <div style="text-align: right;"> 423-2017-02163 </div> </div>	
_____ and EEOC State or local Agency, if any			
Name (indicate Mr., Ms., Mrs.) Mr. Thomas L. Pinkston		Home Phone (incl. Area Code) <div style="text-align: center; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="text-align: center; font-weight: bold;">JUL 31 2017</div>	
Date of Birth 1986		U.S. EEOC/JAO	
Street Address 750 Winn Street, Jackson, MS 39204			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name KASAI NORTH AMERICA		No. Employees, Members 201 - 500	
Phone No. (Include Area Code) (601) 407-5000		U.S. EEOC/JAO	
Street Address 435 Church Road, Madison, MS 39110			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
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Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
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Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
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Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
Street Address 			
Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	
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Name 		No. Employees, Members 	
Phone No. (Include Area Code) 		U.S. EEOC/JAO	



U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION INTAKE QUESTIONNAIRE

Please immediately complete this entire form and return it to the U.S. Equal Employment Opportunity Commission ("EEOC"). **REMEMBER**, a charge of employment discrimination must be filed within the time limits imposed by law, within 180 days or in some places within 300 days of the alleged discrimination. When we receive this form, we will review it to determine EEOC coverage. Answer all questions completely, and attach additional pages if needed to complete your responses. If you do not know the answer to a question, answer by stating "not known." If a question is not applicable, write "N/A." (PLEASE PRINT)

1. Personal Information

Last Name: Pinkston First Name: Thomas MI: L
 Street or Mailing Address: 750 Winn St Apt or Unit #: _____
 City: Jackson County: Hinds State: MS Zip: 39204
 Phone Numbers: Home: (601) 983-8621 Work: () _____
 Cell: (601) 946-2632 Email Address: _____
 Date of Birth: 2/27/86 Sex: ☒ Male ☐ Female Do You Have a Disability? ☐ Yes ☒ No
 Please answer each of the next three questions. i. Are you Hispanic or Latino? ☐ Yes ☒ No
 ii. What is your Race? Please choose all that apply. ☐ American Indian or Alaskan Native ☐ Asian ☐ White
☒ Black or African American ☐ Native Hawaiian or Other Pacific Islander
 iii. What is your National Origin (country of origin or ancestry)? USA

Please Provide The Name Of A Person We Can Contact If We Are Unable To Reach You:

Name: Catina Henderson Relationship: Mother-law
 Address: N/A City: Jackson State: MS Zip Code: N/A
 Home Phone: (601) 500-8670 Other Phone: () _____

2. I believe that I was discriminated against by the following organization(s): (Check those that apply)

☒ Employer ☐ Union ☐ Employment Agency ☒ Other (Please Specify) HR/MS. Harris

Organization Contact Information (If the organization is an employer, provide the address where you actually worked. If you work from home, check here ☐ and provide the address of the office to which you reported.) If more than one employer is involved, attach additional sheets.

Organization Name: Mr Peter/Supervisor
 Address: KASAI North America County: Madison
 City: NA State: MS Zip: 39110 Phone: (601) 407-5000
 Type of Business: Supply Co. Job Location if different from Org. Address: N/A
 Human Resources Director or Owner Name: MS. Harris Phone: (601) 407-5000

Number of Employees in the Organization at All Locations: Please Check (✓) One

☐ Fewer Than 15 ☐ 15 - 100 ☐ 101 - 200 ☒ 201 - 500 ☐ More than 500

3. Your Employment Data (Complete as many items as you are able.) Are you a federal employee? ☐ Yes ☒ No

Date Hired: July 27, 2016 Job Title At Hire: Forklift Driver
 Pay Rate When Hired: 11.00 Last or Current Pay Rate: 11.00
 Job Title at Time of Alleged Discrimination: July 17, 2017 Date Quit/Discharged: July 17, 2017
 Name and Title of Immediate Supervisor: Mr. Peter
 If Job Applicant, Date You Applied for Job 6/1/16 Job Title Applied For Forklift Driver

4. What is the reason (basis) for your claim of employment discrimination?

~~FOR EXAMPLE, if you feel that you were treated worse than someone else because of race, you should check the box next to Race. If you feel you were treated worse for several reasons, such as your sex, religion and national origin, you should check all that apply. If you complained about discrimination, participated in someone else's complaint, or filed a charge of discrimination, and a negative action was threatened or taken, you should check the box next to Retaliation.~~

☐ Race ☐ Sex ☐ Age ☐ Disability ☐ National Origin ☐ Religion ☐ Retaliation ☐ Pregnancy ☐ Color (typically a difference in skin shade within the same race) ☐ Genetic Information; circle which type(s) of genetic information is involved:
i. genetic testing ii. family medical history iii. genetic services (genetic services means counseling, education or testing)

If you checked color, religion or national origin, please specify: _____

If you checked genetic information, how did the employer obtain the genetic information? _____

Other reason (basis) for discrimination (Explain): _____

5. What happened to you that you believe was discriminatory? Include the date(s) of harm, the action(s), and the name(s) and title(s) of the person(s) who you believe discriminated against you. Please attach additional pages if needed.
(Example: 10/02/06 - Discharged by Mr. John Soto, Production Supervisor)

A. Date: 6/26/17-7/7/17 Action: Promised Overtime didn't get it, witness him clocking people in and not on time or clocking them in and not on time and did more
Name and Title of Person(s) Responsible: My Supervisor Mr Peter Meech

B. Date: _____ Action: _____

Name and Title of Person(s) Responsible Mr. Peter Meech / Supervisor

6. Why do you believe these actions were discriminatory? Please attach additional pages if needed.

Since the shutdown 6/26/17-7/7/17 I witness him doing a lot of things towards me and all I did was worked hard

7. What reason(s) were given to you for the acts you consider discriminatory? By whom? His or Her Job Title?

Its plain and simple when I ask the HR lady Ms Harris that why he did bring me to the office for July 10, 2017

8. Describe who was in the same or similar situation as you and how they were treated. For example, who else applied for the same job you did, who else had the same attendance record, or who else had the same performance? Provide the race, sex, age, national origin, religion, or disability of these individuals, if known, and if it relates to your claim of discrimination. For example, if your complaint alleges race discrimination, provide the race of each person; if it alleges sex discrimination, provide the sex of each person; and so on. Use additional sheets if needed.

Of the persons in the same or similar situation as you, who was treated better than you?

Full Name	Race, Sex, Age, National Origin, Religion or Disability	Job Title	Description of Treatment
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A. _____

B. _____

Of the persons in the same or similar situation as you, who was treated *worse* than you?

<u>Full Name</u>	<u>Race, Sex, Age, National Origin, Religion or Disability</u>	<u>Job Title</u>	<u>Description of Treatment</u>
------------------	--	------------------	---------------------------------

A. _____

B. _____

Of the persons in the same or similar situation as you, who was treated the *same* as you?

<u>Full Name</u>	<u>Race, Sex, Age, National Origin, Religion or Disability</u>	<u>Job Title</u>	<u>Description of Treatment</u>
------------------	--	------------------	---------------------------------

A. _____

B. _____

Answer questions 9-12 only if you are claiming discrimination based on disability. If not, skip to question 13. Please tell us if you have more than one disability. Please add additional pages if needed.

9. Please check all that apply:

- ☐ Yes, I have a disability
☐ I do not have a disability now but I did have one
☐ No disability but the organization treats me as if I am disabled

10. What is the disability that you believe is the reason for the adverse action taken against you? Does this disability prevent or limit you from doing anything? (e.g., lifting, sleeping, breathing, walking, caring for yourself, working, etc.).

11. Do you use medications, medical equipment or anything else to lessen or eliminate the symptoms of your disability?

☐ Yes ☐ No

If "Yes," what medication, medical equipment or other assistance do you use?

12. Did you ask your employer for any changes or assistance to do your job because of your disability?

☐ Yes ☐ No

If "Yes," when did you ask? _____ How did you ask (verbally or in writing)? _____

Who did you ask? (Provide full name and job title of person)

Describe the changes or assistance that you asked for: _____

How did your employer respond to your request? _____

13. Are there any witnesses to the alleged discriminatory incidents? If yes, please identify them below and tell us what they will say. (Please attach additional pages if needed to complete your response)

Full Name	Job Title	Address & Phone Number	What do you believe this person will tell us?
A.			
B.			

14. Have you filed a charge previously on this matter with the EEOC or another agency? ☐ Yes ☒ No

15. If you filed a complaint with another agency, provide the name of agency and the date of filing: _____

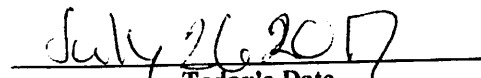
16. Have you sought help about this situation from a union, an attorney, or any other source? ☐ Yes ☒ No
Provide name of organization, name of person you spoke with and date of contact. Results, if any?

Please check one of the boxes below to tell us what you would like us to do with the information you are providing on this questionnaire. If you would like to file a charge of job discrimination, you must do so either within 180 days from the day you knew about the discrimination, or within 300 days from the day you knew about the discrimination if the employer is located in a place where a state or local government agency enforces laws similar to the EEOC's laws. If you do not file a charge of discrimination within the time limits, you will lose your rights. If you would like more information before filing a charge or you have concerns about EEOC's notifying the employer, union, or employment agency about your charge, you may wish to check Box 1. If you want to file a charge, you should check Box 2.

BOX 1 ☒ I want to talk to an EEOC employee before deciding whether to file a charge. I understand that by checking this box, I have not filed a charge with the EEOC. I also understand that I could lose my rights if I do not file a charge in time.

BOX 2 ☒ I want to file a charge of discrimination, and I authorize the EEOC to look into the discrimination I described above. I understand that the EEOC must give the employer, union, or employment agency that I accuse of discrimination information about the charge, including my name. I also understand that the EEOC can only accept charges of job discrimination based on race, color, religion, sex, national origin, disability, age, genetic information, or retaliation for opposing discrimination.


Signature


Today's Date

PRIVACY ACT STATEMENT: This form is covered by the Privacy Act of 1974: Public Law 93-579. Authority for requesting personal data and the uses thereof are:

- 1) FORM NUMBER/TITLE/DATE. EEOC Intake Questionnaire (9/20/08).
- 2) AUTHORITY. 42 U.S.C. § 2000e-5(b), 29 U.S.C. § 211, 29 U.S.C. § 626, 42 U.S.C. 12117(a)
- 3) PRINCIPAL PURPOSE. The purpose of this questionnaire is to solicit information about claims of employment discrimination, determine whether the EEOC has jurisdiction over those claims, and provide charge filing counseling, as appropriate. Consistent with 29 CFR 1601.12(b) and 29 CFR 1626.8(c), this questionnaire may serve as a charge if it meets the elements of a charge.
- 4) ROUTINE USES. EEOC may disclose information from this form to other state, local and federal agencies as appropriate or necessary to carry out the Commission's functions; or if EEOC becomes aware of a civil or criminal law violation. EEOC may also disclose information to respondents in litigation, to congressional offices in response to inquiries from parties to the charge, to disciplinary committees investigating complaints against attorneys representing the parties to the charge, or to federal agencies inquiring about hiring or security clearance matters.
- 5) WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL FOR NOT PROVIDING INFORMATION. Providing this information is voluntary but the failure to do so may hamper the Commission's investigation of a charge. It is not mandatory that this form be used to provide the requested information.

JT13

CHARGE QUESTIONNAIRE

EEOC Use Only

Name (Intake Officer)

This form is affected by the Privacy Act of 1974; see Privacy Act Statement on back before completing this form.

423-2017-02163

Please answer the following questions, telling us briefly why you believe you have been discriminated against in employment. An officer of the EEOC will talk with you after you complete this form.

Date of Birth

02 - 27 - 1986

NAME Thomas L Pinkston (Please Print) DATE 7-24-2017
 (First) (Middle Name or Initial) (Last)

ADDRESS 2412 150 Winn St TELEPHONE NO. (Include area code) 601-983-8621

CITY Jackson STATE ms ZIP 39204 COUNTY Hinds

Please provide the name of an individual at a different address in your local area who would know how to reach you.

NAME Vanessa Pinkston RELATIONSHIP Mom PHONE 601-946-2632
 ADDRESS 144 Melrose Dr CITY Jackson STATE ms ZIP 39204

I believe I was discriminated against by: (Check those that apply)



EMPLOYER



UNION (Give Local No.)

EMPLOYMENT
AGENCY

OTHER (Specify)

APPROX NO. EMPLOYED BY
THIS EMPLOYER

RECEIVED

Employer Kasol North America, LLC Employer ADDRESS 435 Church Rd ADDRESS CITY, STATE, ZIP Madison ms 39110 CITY, STATE, ZIP

If you checked "Employer" above, are you now employed by the Employer that you believed discriminated against you?

YES: From 4/1/17

NO: I applied for

OR: I was employed as Forklift operator

forklift operator
 (current position)

(position)
 on _____
 (Date)

until 7/27/16 I was 7/17/17
 (date) (laid off, fired, etc.)

What action was taken against you that you believe to be discriminatory? What harm, if any, was caused to you or others in your work situation as a result of that action? (if more space is required, use reverse.)

I was ask to leave my job after my manager reported I've left work without him knowing but I did so. On Friday the 14th day of July I was called my mom very sick I worked 4 hours before I got the call about my mom illness. I contact my boss and Monday I were called to the office for a meeting. After speaking with HR about the situation they told me to leave and they will get back with me. I have proof and everything about the situation thanks.

WHAT WAS THE MOST RECENT DATE THE HARM YOU ALLEGED TOOK PLACE?

July, 17, 2017

Why do you believe this action was taken against you?

My manager began acting funny towards me doing Nissan shutdown. It all start when we as employees at the plant wasn't paid for the shutdown for two ~~for~~ weeks. We were offered to ~~have~~ work ten hours a day doing the shutdown. When I talked to him they changed. After we started and everyday doing the first week at shutdown he told me to leave early or its not enough work for me. But I witness him letting other get the time and even overtime he lied to me. The person I trained to me his check was 6 sum and he told know what I did to get that much. I witness him giving people time and even clocking them in when late like they were on time that stealing time and I can't about it.

Normally, your identity as a complainant will be disclosed to the organization which allegedly discriminated against you.

Do you ☒ consent or ☐ not consent to such disclosures?

Have you sought assistance about the action you think was discriminatory from any agency, from your union, an attorney, or from any other source? ☐ No ☒ Yes (If answer is yes, complete below.)

NAME OF SOURCE ASSISTANCE

Morgan and Morgan

DATE 7/21/17

RESULTS IF ANY:

On going

Have you filed a complaint about the action you think was discriminatory with any other Federal, State, or Local Government Anti-discrimination agency? ☒ No ☐ Yes (If answer is yes, complete below.)

NAME OF SOURCE ASSISTANCE

DATE

RESULTS IF ANY:

Have you filed an EEOC Charge in the past? ☒ No ☐ Yes (If answer is yes, complete below)

APPROX. DATE FILED

ORGANIZATION CHARGED

CHARGE NUMBER (IF KNOWN)

I declare under penalty of perjury that the foregoing is true and correct.

SIGNATURE

Thos Ben

DATE 7-24-17

PRIVACY ACT STATEMENT: This form is covered by the Privacy Act of 1974: Public Law 93-579. Authority for requesting personal data and the uses thereof are:

1. FORM NUMBER/TITLE/DATE. EEOC Form 283, Charge Questionnaire (12/93).
2. AUTHORITY. 42 U.S.C. § 2000e-5(b), 29 U.S.C. § 211, 29 U.S.C. § 628, 42 U.S.C. 12117(a)
3. PRINCIPAL PURPOSE. The purpose of this questionnaire is to solicit information in an acceptable form consistent with statutory requirements to enable the Commission to act on matters within its jurisdiction. When this form constitutes the only timely written statement of allegations of employment discrimination, the Commission will, consistent with 29 CFR 1601.12(b) and 29 CFR 1628.8(b), consider it to be a sufficient charge of discrimination under the relevant statute(s).
4. ROUTINE USES. Information provided on this form will be used by Commission employees to determine the existence of facts relevant to a decision as to whether the Commission has jurisdiction over allegations of employment discrimination and to provide such charge filing counselling as is appropriate. Information provided on this form may be disclosed to other State, local and federal agencies as may be appropriate or necessary to carrying out the Commission's functions. Information may also be disclosed to charging parties in consideration of or in connection with litigation.
5. WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL FOR NOT PROVIDING INFORMATION. The providing of this information is voluntary but the failure to do so may hamper the Commission's investigation of a charge of discrimination. It is not mandatory that this form be used to provide the requested information.